

Application Data Sheet

Application Information

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| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Classification:: | |
| Suggested Group Art Unit:: | |
| CD-ROM or CD-R?:: | None |
| Number of CD disks:: | |
| Number of Copies of CDs:: | |
| Sequence Submission?:: | None |
| Computer Readable Form (CRF):: | No |
| Number of copies of CRF:: | 0 |
| Title:: | PROCESS FOR THE PRODUCTION OF FOODSTUFF SMOKE BY PYROLYSIS, USE OF A REACTOR PARTICULARLY ADAPTED TO SAID PROCESS, SMOKE AND SMOKED FOODSTUFFS THUS OBTAINED |
| Attorney Docket Number:: | 0514-1047-1 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | |
| Total Drawing Sheets:: | |
| Small Entity?:: | Yes |
| Latin Name:: | |
| Variety Denomination Name:: | |
| Petition Included?:: | No |
| Petition Type:: | |
| Licensed US Gov't Agency:: | |
| Contract or Grant Numbers:: | |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: GERMANY
Status:: Full Capacity
Given Name:: PIERRE
Middle Name::
Family Name:: HOLZSCHUH
City of Residence:: KEHL
State or Province of Residence::
Country of Residence:: GERMANY
Street of Mailing Address:: HEILIGENFELDSTRASSE 4

City of Mailing Address:: KEHL
State or Province of Mailing Address::
Country of Mailing Address:: GERMANY
Postal or Zip Code of Mailing Address:: 77694

Applicant Authority Type:: Inventor
Primary Citizenship Country:: GERMANY
Status:: Full Capacity
Given Name:: GEORG
Middle Name::
Family Name:: BUCH
City of Residence:: SCHUTTERWALD
State or Province of Residence::
Country of Residence:: GERMANY
Street of Mailing Address:: AHORN-WEG 19/1

City of Mailing Address:: SCHUTTERWALD
State or Province of Mailing Address::
Country of Mailing Address:: GERMANY
Postal or Zip Code of Mailing Address:: 77746

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: FRANCE
 Status:: Full Capacity
 Given Name:: JEAN-JACQUES
 Middle Name::
 Family Name:: WEILAND
 City of Residence:: HATTMATT
 State or Province of Residence::
 Country of Residence:: FRANCE
 Street of Mailing Address:: 1 RUE GEROLD SECK

City of Mailing Address:: HATTMATT
 State or Province of Mailing Address::
 Country of Mailing Address:: FRANCE
 Postal or Zip Code of Mailing Address:: 67330

Correspondence Information

Correspondence Customer Number:: 000466

Representative Information

| | |
|----------------------------------|--------|
| Representative Customer Number:: | 000466 |
|----------------------------------|--------|

Domestic Priority Information

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|------------------|--------------------|----------------------|----------------------|
| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This application | Non-Provisional of | 60/396,015 | 7/16/02 |
| | | | |

Foreign Priority Information

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|-----------|-------------------------|---------------|-----------------------|
| Country:: | Application Number:: | Filing Date:: | Priority Claimed:: |
| FRANCE | 02 08495 | 7/5/02 | Yes |
| | | | |

Assignment Information

Assignee Name:: SOFRAL SOCIETE FRANCAISE

D'ALIMENTATION S.A.

Street of Mailing Address:: 30 RUE JOSEPH MARIE JACQUARD

City of Mailing Address:: ILLKIRCH GRAFFENSTADEN

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 67400